50184 Pra titi n r's Docket N .

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK

In re application of:

Mori tal.

Application No.: 0 8 / 726,613

Group No.:

1752

Filed: October 7, 1996

Examiner:

J. Chu

For: DYED PHOTORESISTS AND METHODS AND ARTICLES

OF MANUFACTURE COMPRISING SAME

RESPONSE UNDER 37 C.F.R. § 1.116 EXPEDITED PROCEDURE **EXAMINING GROUP**

Corres. and Mail

j

Box AF **Assistant Commissioner for Patents** Washington, D.C. 20231

NOTE: To take advantage of the expedited procedure the envelope in which this paper is mailed must be addressed as shown and must also be marked "Box AF" in the lower left hand corner. Alternatively, this paper can be hand carried to the particular Examining Group or other area of the Officekin which the application is pending, in which case any envelope in which this paper is placed must be marked as in the bold type box above. Notice of Sept. 20, 1985 (1059 O.G. 19-20). See M.P.E.P. § 714.13,

AMENDMENT OR RESPONSE AFTER FINAL REJECTION—TRANSMITTAL

1. Transmitted herewith is an amendment after final rejection (37 C.F.R. § 1.116) for this application.

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10' (When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)

I hereby certify	that, on	the date	shown below	, this	correspondence	is	being:
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		MAILING
Ä	for Patents, Washington, D.C. 20231	vice in an envelope induressed to the Assistant Commissioner
	37 C.F.R. § 1.8(a)	37 C.F.R. § 1.10°
X)	with sufficient postage as first class mail.	☐ as "Express Mail Post Office to Addressee" Mailing Label No(mandatory)
	т	RANSMISSION
	transmitted by facsimile to the Patent and T	rademark Office.
		Deama M. Jandy
D~	te: <u>7/14/99</u>	Signature
υa	te: <u>///4///</u>	Deanna M. Landry

(type or print name of person certifying)

*WARNING: Each paper or fee filed by Express Mail must have the number of the "Express Mail" mailing label placed thereon prior to mailing. 37 C.F.R. § 1.10(b).

"Since the filing of correspondence under § 1.10 without the Express Mail mailing label thereon is an versight that can be avoided by the exercise of reasonable care, requests for waiver fithis requirement will not be granted on petition." Notice of Oct. 24, 1996, 60 Fed. Reg. 56,439, at 56,442.

(Amendment or Response After Final Rejection-Transmittal [9-20]-page 1 of 4)

NOTE: Response t Final Rejection—Avoiding Extension Fees "In patent applications wherein a three month Shortened Statutory Period (SSP) is set for response to a Final Rejection, the response would best be filed within two months of the date of the Office Action. If filed within two months, any Advisory Action mailed after the SSP expires will reset the SSP t expire on the date of the Advisory Action for extension fee purposes, but n ver more than six months from the date of the Final R jection." Notice of N v. 30, 1990 (1122 O.G. 571 to 591). See M.P.E.P. § 714.13, 6th ed., rev. 3.

STATUS

2.	App	Applicant is							
			is attached.						
			was already file	d.					
	X								
				EXTENSION OF TE	RM				
NOT	E: A	s to a	a Supplemental Amen 85 (1061 O.G. 34-35)	dment filed in response to a states:	a final office action, the Notice of L	December			
	fi. O fc	ling au f the or allo	nd/or entry of a Notice shortened statutory p	of Appeal or filing and/or entre eriod unless the timely-filed in a Notice of Appeal has beer	tion, an extension of time is required ry of an additional amendment after response placed the application in n filed within the shortened statuto	expiration condition			
3.			(co	mplete (a) or (b), as ap	oplicable)				
	(a)				time under 37 C.F.R. 1.136 e total number of months c				
	Ext	tensi	on	Fee for other than	Fee for				
	<u>(m</u>	onth	<u>is)</u>	small entity	small entity				
			onth	\$ 110.00	\$ 55.00				
☐ two months				\$ 380.00	\$ 190.00				
Н	_		months ionths	\$ 870.00 \$ 1,360.00	\$ 435.00				
u	10	ui III	ioriuis	\$ 1,300.00	\$ 680.00				
				Fee:	\$				
lf a	addi	tiona	il extension of tim	ne is required, please o	consider this a petition there	ofor.			
			(check and	complete the next iten	n, if applicable)				
		the	extension for refor of \$ extension now rec	is deducted from the	eady been secured and the f ne total fee due for the total	ee paid months			
			Extension fe	e due with this reques	t \$				
				OR					
(b)	(X)	tion	al petition is being	ng made to provide fo	m is required. However, this ir the possibility that application and fee for extension	ant has			

(Amendment or Response After Final Rejection-Transmittal [9-20]-page 2 of 4)

FEE F R CLAIMS

4.	The	e fee for cla	aims (37	C.F.R. § 1.16	6(b)-(d)) has	s been o	calculated	d as	shown	below:
		(Col. 1)		(Col. 2)	(Col. 3)	SMALI	. ENTITY			THAN A ENTITY
		CLAIMS REMAINING AFTER MENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	. •		MINUS	**	=	×\$9=	\$	•	×\$18=	s
INDEP.			MINUS	***	=	=\$39=	s	•	=\$78=	S
☐ FIRS	T PR	ESENTATION	OF MUL	TIPLE DEP. CLAIN	4	+\$130=	s	•	+\$260=	\$
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			(0	complete (c) oi	· (d), as ap	plicable)			
(c)	X	No addition	onal fee	is required.						
					OR					
(d)		Total add	itional fe	e required is \$	S	_				
				FEE P	AYMENT					
5.		Attached	is a che	ck in the sum	of \$					
		Charge A	ccount N	lo	the sum	of \$				
		A duplicat	te of this	transmittal is	attached.					

FEE DEFICIENCY

NOTE: Where there is a fee deficiency and there is no authorization t charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the case. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

6. If any additional extension and/or fee is required, charge Account No. 04-1105

AND/OR

If any additional fee for claims is required, charge Account No. <u>04-1105</u>

SIGNATURE OF PRACTITIONER

Peter F. Corless

(type or print name of practitioner)

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